

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08137

FILED
Jan 12, 2004
Secretary of State**Entity Name:** CLARENCE M. YATES MINISTRIES, INC.**Current Principal Place of Business:**5830 TRINITY LANE
ORLANDO, FL 32839 US**New Principal Place of Business:****Current Mailing Address:**5830 TRINITY LANE
ORLANDO, FL 32839 US**New Mailing Address:****FEI Number:** 59-2530526 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**YATES, CLARENCE M.
400 DEERWOOD AVENUE
ORLANDO, FL 32825 US**Name and Address of New Registered Agent:**YATES, CHARLOTTE M VP.
5830 TRINITY LANE
ORLANDO, FL 32839 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CHARLOTTE M YATES

01/12/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** VP () Delete
Name: YATES, CHARLOTTE M
Address: 400 DEERWOOD AVE
City-St-Zip: ORLANDO, FL**Title:** CD () Delete
Name: TAYLOR, KEITH
Address: 3621 NORTHGLENN DR
City-St-Zip: ORLANDO, FL 328067059**Title:** D () Delete
Name: HARRELL, BOB
Address: 5300 S ORANGE AVE
City-St-Zip: ORLANDO, FL 32809**Title:** D () Delete
Name: LANDRY, MACK
Address: 200 SPRING RUN CIR
City-St-Zip: LONGWOOD, FL 327794971**Title:** D () Delete
Name: LANE, JOSEPH
Address: 7421 PINEMOUNT DR
City-St-Zip: ORLANDO, FL 32819**Title:** D () Delete
Name: SCHLURAFF, JAMES
Address: 1802 LAKE GROVE LANE
City-St-Zip: ORLANDO, FL 32806**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** VP (X) Change () Addition
Name: YATES, CHARLOTTE M
Address: 5830 TRINITY LANE
City-St-Zip: ORLANDO, FL 32839 US**Title:** CD (X) Change () Addition
Name: TAYLOR, KEITH
Address: 3621 NORTHGLENN DR
City-St-Zip: ORLANDO, FL 328067059 US**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
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City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEITH TAYLOR

CB

01/12/2004

Electronic Signature of Signing Officer or Director

Date